

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF UNITED STATES OF AMERICA	COURT CASE NUMBER 94-70 JSF
DEFENDANT JAWANDA E. HARRIS	TYPE OF PROCESS WRIT OF GARNISHMENT

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
JAWANDA E. HARRIS
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
202 W. 35TH STREET, APT. 2B, WILMINGTON, DE 19802-2613

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

RENEE A. AUSTIN
PARALEGAL SPECIALIST
UNITED STATES ATTORNEY'S OFFICE
1007 ORANGE STREET, SUITE 700
WILMINGTON, DE 19899

Number of process to be served with this Form 285

1

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

DEFENDANT CAN ALSO BE SERVED AT PLACE OF EMPLOYMENT: 1400 HARVEY ROAD, WILMINGTON, DE 19810

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

302-573-6277

DATE

4/25/06

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINEI acknowledge receipt for the total number of process indicated.
(Sign only for USM 285 if more than one USM 285 is submitted)

Total Process

District of Origin

No. 15

District to Serve

No. 15

Signature of Authorized USMS Deputy or Clerk

BF

Date

4-26-06

I hereby certify and return that ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

JAWANDA HARRIS

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

1400 HARVEY RD, WILMINGTON

Date

4-28-06

Time

1020

☒ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

Total Mileage Charges including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or (Amount of Refund*)

\$0.00

REMARKS:

PRINT 5 COPIES:

1. CLERK OF THE COURT

2. USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 12/15/80
Automated 01/00